

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/430,973	11/01/1999	702	2862	P04255US0

APPLICANT
BRIAN W CARR, NEVADA, IOWA; PETER B MOORE, AMES, IOWA; DONALD F HANDORF,
AMES, IOWA; TIMOTHY A SCHROEDER, AMES, IOWA.

CONTINUING DOMESTIC DATA***
VERIFIED
OK NONE

371 (NAT'L STAGE) DATA***
VERIFIED
OK NONE

FOREIGN APPLICATIONS***
VERIFIED
OK NONE

FOREIGN FILING LICENSE GRANTED 11/17/1999 SMALL ENTITY

Foreign priority claimed 35 USC 119 (a-d) conditions met	<input type="radio"/> yes <input checked="" type="radio"/> no <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and acknowledged	<u>OK</u> Examiner's Name Initials	IA	3	5	1

ADDRESS
DONALD H ZARLEY
ZARLEY MCKEE THOMTE
VOORHEES & SEASE PLC
801 GRAND AVENUE SUITE 3200
DES MOINES , IA 50309-2721

TITLE
METHOD FOR IDENTIFYING THE IDENTITY OF A GROWING OR GROWN CROP IN A
FIELD LOCATION

FILING FEE RECEIVED \$**380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="radio"/> All Fees <input type="radio"/> 1.16 Fees (Filing) <input type="radio"/> 1.17 Fees (Processing Ext. of Time) <input type="radio"/> 1.18 Fees (Issue) <input type="radio"/> Other _____ <input type="radio"/> Credit
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SERIAL NUMBER 09/430,973	FILING DATE 11/01/99	CLASS 701 702	GROUP ART UNIT 3661 2862	ATTORNEY DOCKET NO. P04255US0
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APPLICANT

BRIAN W. CARR, NEVADA, IA; PETER B. MOORE, AMES, IA; DONALD F. HANDORF, AMES, IA; TIMOTHY A. SCHROEDER, AMES, IA.

CONTINUING DOMESTIC DATA***
 VERIFIED
0 NONE

371 (NAT'L STAGE) DATA***
 VERIFIED
0 NONE

FOREIGN APPLICATIONS***
 VERIFIED
0 NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/17/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 3	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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Verified and Acknowledged 0 Examiner's Initials _____ Initials _____

ADDRESS

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 DES MOINES IA 50309-2721

TITLE

METHOD FOR IDENTIFYING THE IDENTITY OF A GROWING OR GROWN CROP IN A FIELD LOCATION

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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